

BEST AVAILABLE COPY

CLAIMS ONLY							Application Number 09/845960		Filing Date			
							Applicant(s)					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	11						Total Indep					
Total Depend							Total Depend					
Total Claims							Total Claims					

BEST AVAILABLE COPY

CLAIM		DATE						
FINAL	ORIGINAL							
	151							
	152							
	153							
	154							
	155							
	156							
	157							
	158							
	159							
	160							
	161							
	162							
	163							
	164							
	165							
	166							
	167							
	168							
	169							
	170							
	171							
	172							
	173							
	174							
	175							
	176							
	177							
	178							
	179							
	180							
	181							
	182							
	183							
	184							
	185							
	186							
	187							
	188							
	189							
	190							
	191							
	192							
	193							
	194							
	195							
	196							
	197							
	198							
	199							
	200							